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CONFIRMATION NO. 4636

SERIAL NUMBER 10/674,333	FILING OR 371(c) DATE 09/30/2003 RULE	CLASS 606	GROUP ART UNIT 3739	ATTORNEY DOCKET NO. GYN5003	
APPLICANTS Scott Ciarrocca, Stockton, NJ; ** CONTINUING DATA ***** <i>None up</i> ** FOREIGN APPLICATIONS ***** <i>None up</i> IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 12/22/2003					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance Verified and Acknowledged <i>Michael J. Kelly</i> Examiner's Signature <i>Michael J. Kelly</i>		STATE OR COUNTRY NJ	SHEETS DRAWING 7	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
ADDRESS 27777					
TITLE Bipolar tissue morcellator					
FILING FEE RECEIVED 750	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		